



STATE OF TENNESSEE
DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT
BOARD OF EMPLOYEE ASSISTANCE PROFESSIONALS
220 FRENCH LANDING DRIVE
NASHVILLE, TENNESSEE 37243
(615) 741-2859

EMPLOYEE ASSISTANCE PROFESSIONAL INTERN EVALUATION

Intern: _____

Supervisor: _____

Date: _____

Rate the employee assistance intern regarding the guidelines listed below using the scale provided.

- 1 Ineffective
- 2 Minimally effective
- 3 Effective
- 4 Very effective
- 5 Other: Please explain in comments.

ETHICS AND PROFESSIONAL CONDUCT

- | | | | | | | |
|----|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|
| 1. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | Complies with all standards which are prerequisite to licensure. |
| 2. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | Examines referral practice for necessity and avoids actual or perceived conflict of interest. |

RECORD KEEPING

- | | | | | | | |
|----|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|
| 3. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | Maintains confidential client records in accordance with federal regulation 42 CFR Part 2 and applicable state law. |
| 4. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | Documents demographic data, initial assessment, EAP recommendations, and follow-up contacts. |

SUPERVISOR/UNION REPRESENTATIVE CONSULTATION

- | | | | | | | |
|----|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|
| 5. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | Provides individual consultation to supervisors and union representatives regarding the management and referral services to employees with job performance and behavioral/medical problems. |
|----|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|

CRISIS INTERVENTION

6. ☐1 ☐2 ☐3 ☐4 ☐5

Arranges to have crises intervention services available 24 hours a day for covered employees, their family members, and contracting organizations.

ASSESSMENT AND REFERRAL

7. ☐1 ☐2 ☐3 ☐4 ☐5

Conducts an assessment to identify a problem, develops a plan of action, and when appropriate refers to an outside source for problem resolution.

8. ☐1 ☐2 ☐3 ☐4 ☐5

Bases referrals on client needs and resources as revealed by the assessment and supported by observation and documentation.

SHORT TERM PROBLEM RESOLUTION

9. ☐1 ☐2 ☐3 ☐4 ☐5

Determines which clients are appropriate for short term problem resolution services.

10.

When providing short term counseling, the intern:

a. ☐1 ☐2 ☐3 ☐4 ☐5

Explains the purpose of counseling sessions.

b. ☐1 ☐2 ☐3 ☐4 ☐5

Discusses the rules for the counseling process.

c. ☐1 ☐2 ☐3 ☐4 ☐5

Directs counseling interaction.

d. ☐1 ☐2 ☐3 ☐4 ☐5

Helps the employee/client define his/her needs.

e. ☐1 ☐2 ☐3 ☐4 ☐5

Seeks background information about the presenting problem.

f. ☐1 ☐2 ☐3 ☐4 ☐5

Maintains an objective stance.

g. ☐1 ☐2 ☐3 ☐4 ☐5

Uses self-disclosure and demonstrates warmth.

h. ☐1 ☐2 ☐3 ☐4 ☐5

Empathizes with family members.

- i. ☐1 ☐2 ☐3 ☐4 ☐5 Reassures client that his/her problem is of real importance.

MONITORING AND FOLLOW UP

11. ☐1 ☐2 ☐3 ☐4 ☐5 Reviews and monitors the progress of referrals.
12. ☐1 ☐2 ☐3 ☐4 ☐5 Maintains contact with the client and treatment provider to assure that goals are being met.
13. ☐1 ☐2 ☐3 ☐4 ☐5 Follows up with referring supervisors.

EXTERNAL RESOURCES

14. ☐1 ☐2 ☐3 ☐4 ☐5 Identifies and evaluates community resources which provide quality assistance at reasonable cost for employees, family members, and the work organization.
15. ☐1 ☐2 ☐3 ☐4 ☐5 Utilizes those resources taking into consideration the nature and severity of the problem, treatment resources, availability of health care benefit coverage, and client choice.
16. ☐1 ☐2 ☐3 ☐4 ☐5 Helps employee gain access to external resources.

EAP PROMOTION AND EDUCATION

17. ☐1 ☐2 ☐3 ☐4 ☐5 Ensures the availability and use of promotional materials and educational activities which encourage use of services by supervisors, union representatives, employees, and covered family members.

EVALUATION

18. ☐1 ☐2 ☐3 ☐4 ☐5 Evaluates the appropriateness, effectiveness, and efficiency of EAP services provided to clients.

CONTINUING EDUCATION

19. ☐1 ☐2 ☐3 ☐4 ☐5 Pursues on-going education and professional development in all facets of employee assistance services.

LIABILITY

20. ☐1 ☐2 ☐3 ☐4 ☐5 Maintains adequate professional and other appropriate liability coverage.

Comments:

This Employee Assistance Professional Intern Evaluation was completed and jointly reviewed by the undersigned intern and supervising licensed employee assistance professional.

| | |
|---------------------|------|
| Signature of Intern | Date |
|---------------------|------|

Signature of Supervisor _____ Date _____

"The Tennessee Department of Labor and Workforce Development is an equal opportunity employer. Auxiliary aids and services are available upon request." TDD/TTY: 615-532-2879; 1-800-848-0299